

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

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Deliver to: Chankong, Dohm, USPTO

Art Group: 2152

Facsimile No.: (571) 273-8300

Date: January 27, 2006

From: Ashley R. Orr, Reg. No. 55,515

Our Docket No.: 42390P9765X

Number of pages 18 including this sheet.

Application No.: 09/895,557

Filing Date: 6/29/2001

Enclosed are the following documents:

Docket Due Date(s): 2/5/2006

Enclosed are the following documents:

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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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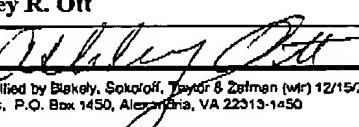
Leah Schwenke 1/27/2006
Leah Schwenke Date

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FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>																																																																																	
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	June 29, 2001																																																																																
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under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.																																																																																			
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<p>1. EXTRA CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>37</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>5</td> <td>6*</td> <td>0 X 50.00 = \$0.00</td> <td>\$0.00</td> </tr> <tr> <td colspan="4">Multiple Dependent</td> <td></td> </tr> <tr> <td>Large Entity</td> <td>Small Entity</td> <td colspan="3"></td> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> </tr> <tr> <td>1202</td> <td>50</td> <td>2202</td> <td>25</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>200</td> <td>2201</td> <td>100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>380</td> <td>2203</td> <td>150</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>1204</td> <td>790</td> <td>2204</td> <td>395</td> <td>*Reissue Independent claims over original patent</td> </tr> <tr> <td>1205</td> <td>300</td> <td>2205</td> <td>150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="2">SUBTOTAL (1)</td> <td colspan="2">(\$)</td> <td>0.00</td> </tr> </tbody> </table>				Total Claims	37	Extra Claims	Fee from below	Fee Paid	Independent Claims	5	6*	0 X 50.00 = \$0.00	\$0.00	Multiple Dependent					Large Entity	Small Entity				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	1202	50	2202	25	Claims in excess of 20	1201	200	2201	100	Independent claims in excess of 3	1203	380	2203	150	Multiple Dependent claim, if not paid	1204	790	2204	395	*Reissue Independent claims over original patent	1205	300	2205	150	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (1)		(\$)		0.00																									
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SUBMITTED BY																																																																																			
Name (Print/Type)		Ashley R. Ott	Registration No. (Attorney/Agent)	55,515	Telephone	(303) 740-1980																																																																													
Signature				Date	01/27/06																																																																														

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
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FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>					
Patent fees are subject to annual revision.		Application Number	09/895,557				
		Filing Date	June 29, 2001				
		First Named Inventor	Andrew V. Anderson				
		Examiner Name	Chankong, Dohm				
		Art Unit	2152				
		Attorney Docket No.	42390P9765X				
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
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under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.							
FEE CALCULATION							
1. EXTRA CLAIM FEES							
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1204 780	2204 385	"Rescue" independent claims over original patent					
1205 300	2205 150	"Rescue" claims in excess of 20 and over original patent					
SUBTOTAL (1) (\$)				0.00			
^a or number previously paid, if greater, For Reseues, see below							
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Other fee (specify)				SUBTOTAL (2) (\$)			

SUBMITTED BY						<i>Complete if applicable</i>	
Name (Print/Type)	<u>Ashley R. Ott</u>		Registration No. (Attorney/Agent)	55,515	Telephone	(303) 740-1980	
Signature	<u>Ashley Ott</u>				Date	01/27/06	

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (Mr) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Our Docket No.: 042390.P9765X

**RESPONSE UNDER 37 C.F.R. § 1.116
- EXPEDITED PROCEDURE -
EXAMINING GROUP 2100**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Anderson)	Examiner: Chankong, Dohm
Application No.: 09/895,557)	Art Group: 2152
Filed: June 29, 2001)	
For: Method and Apparatus for Message <u>Escalation by Digital Assistants</u>)	

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RESPONSE AFTER FINAL

Mail Stop: AF
Commissioner for Patents
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Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed on December 5, 2005, which was made final, applicant submits this Amendment After Final Action for consideration.

FIRST CLASS CERTIFICATE OF MAILING/FACSIMILE

I hereby certify that I am causing the above-referenced correspondence to be facsimile transmitted and to be deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and that this paper or fee has been addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

January 27, 2006

Date of Deposit

Leah Schwenke

Name of Person Mailing Correspondence

Leah Schwenke

Signature

1/27/06

Date

Docket No.: 042390.P9765X

Application No.: 09/895,557